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FROM: Quan L. Nguyen TIMEKEEPER NO.: 2350
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OF PAGES (INCLUDING COVER): 17 FILE NAME: ALLE0068-100 (17326 CIP2 (BOT))
DATE: September 25, 2006 FILE #: 186873

RECIPIENT(S)	PHONE	FAX
U.S. Patent Office		571-273-8300

In re application of: Mitchell F. Brin

Serial No: 10/071,826

Examiner: Alana M. Harris

Filed: February 8, 2002

Group Art Unit: 1643

For: Methods for Treating Mammary Gland Disorders Confirm: 2841

Please find attached:

Transmittal Form (1)

Fee Transmittal Form (2)

Amendment and Request for Reconsideration (9)

Request for Continued Examination (2)

Petition for Extension of Time (2)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/071,826
	Filing Date	February 8, 2002
	First Named Inventor	Mitchell F. Brin
	Art Unit	1643
	Examiner Name	Alana M. Harris
Total Number of Pages in This Submission	Attorney Docket Number	17326 CIP2

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): Request for Continued Examination
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm	Cozen O'Connor		
Signature			
Printed Name	Quan L. Nguyen		
Date	September 25, 2006	Reg. No.	46,957

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Typed or printed name	Quan L. Nguyen	Date	September 25, 2006

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1810

Complete if Known

Application Number 10/071,826
Filing Date February 8, 2002
First Named Inventor Mitchell F. Brin
Examiner Name Alana M. Harris
Art Unit 1643
Attorney Docket No. ALLE0068-100 (17328CIP2)

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	Fee(\$)	Small Entity Fee(\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

<u>Fee Description</u>				<u>Fee (\$)</u>	<u>Fee (\$)</u>
Each claim over 20 (including Rcissues)				50	25
Each independent claim over 3 (including Rcissues)				200	100
Multiple dependent claims				360	180
<u>Total Claims</u>		<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
_____ -20 or HP		_____	x _____	= _____	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>
HP = highest number of total claims paid for, if greater than 20.					
<u>Indep. Claims</u>		<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>	
_____ - 3 or HP		_____	x _____	= _____	
HP = highest number of independent claims paid for, if greater than 3.					

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
_____ - 100 = _____	_____ / 50 = _____	(round up to a whole number) x _____	_____	_____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)	_____
Request for Continued Examination	\$790
3-month Extension	\$1,020

SUBMITTED BY

Signature _____	Registration No. (Attorney/Agent) 48,937	Telephone 215-665-2158
Name (Print/Type) Quan L. Nguyen	Date September 25, 2006	

This collection of information is required by 37 CFR 1.135. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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